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# United States Bankruptcy Court District of Puerto Rico, San Juan Division

IN RE:		Case No
ORTIZ DIAZ, EDWIN JAVIER		Chapter 13
	Debtor(s)	
	VERIFICATION OF CREDITOR MA	TRIX
The above named debtor(s) hereby v	erify(ies) that the attached matrix listing credi	itors is true to the best of my(our) knowledge.
Date: February 20, 2020	Signature: /s/ EDWIN JAVIER ORTIZ DIAZ	
	EDWIN JAVIER ORTIZ DIAZ	Debtor
Date:	Signature:	
		Joint Debtor, if any

Asoc Residentes Mansiones del Caribe Inc 175 Calle Aquamarina Humacao, PR 00791

ASUME PO Box 11218 San Juan, PR 00910-2318

Autoridad Acueductos Y Alcantarillados PO Box 70101 San Juan, PR 00936-8101

Autoridad de Energia Electrica PO Box 363508 San Juan, PR 00936-3508

Banco Popular de Puerto Rico Mortgage Servicing Department PO Box 362708 San Juan, PR 00936-2708

Cap1/wmt PO Box 30281 Salt Lake City, UT 84130-0281

Cbna PO Box 6497 Sioux Falls, SD 57117-6497 Cintron Flores Law Office Lcdo Reinaldo Cintron Flores PO Box 4133 Bayamon, PR 00958-1133

Citi PO Box 6190 Sioux Falls, SD 57117-6190

Departamento de Hacienda Bankruptcy Section 235 Ave Arterial Hostos Ste 1504 San Juan, PR 00918-1451

DTOP PO Box 41269 Minillas Station San Juan, PR 00940-1269

Empresas Berrios Inc PO Box 674 Cidra, PR 00739-0674

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107-0145

Firstbank Puerto Rico PO Box 11856 San Juan, PR 00910-3856 Firstbank Puerto Rico Departamentos de Autos PO Box 11852 San Juan, PR 00910-1852

FirstBank/Leasing
Departamentos de Autos
PO Box 11852
San Juan, PR 00910-1852

Jefferson Capital Systems LLC PO Box 7999 Saint Cloud, MN 56302-7999

Lcdo Luis R. Vivas Ugartemendia 469 Cond Plaza Esmeralda Apt 132 Guaynabo, PR 00969-4282

Mercedes Benz Financia PO Box 961 Roanoke, TX 76262-0961

Money Express PO Box 9146 San Juan, PR 00908-0146

Oriental Bank PO Box 195115 San Juan, PR 00919-5115 Oriental Bank PO Box 1952 Humacao, PR 00791

Rivera Munich & Hernandez Law Offices PS Lcda Lisa M. Aponte Valderas PO Box 364908 San Juan, PR 00936-4908

Rodriguez Fernandez Law Offices, P.S.C. PO Box 71418
San Juan, PR 00936-8518

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### United States Bankruptcy Court District of Puerto Rico, San Juan Division

IN RE:	Case No	
ORTIZ DIAZ, EDWIN JAVIER	Chapter 13	
Debtor(s		
	ON OF NOTICE TO CONSUMER DEBTOR(S) § 342(b) OF THE BANKRUPTCY CODE	
Certificate of	[Non-Attorney] Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer notice, as required by § 342(b) of the Bankruptcy	signing the debtor's petition, hereby certify that I delivered to Code.	the debtor the attached
Printed Name and title, if any, of Bankruptcy Pet Address:	petition preparer is the Social Security	
XSignature of Bankruptcy Petition Preparer of offi partner whose Social Security number is provided	cer, principal, responsible person, or	2.0.3 1100)
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have rece	eived and read the attached notice, as required by § 342(b) of the	he Bankruptcy Code.
ORTIZ DIAZ, EDWIN JAVIER	X /s/ EDWIN JAVIER ORTIZ DIAZ	2/20/2020
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

Date

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF PUERTO RICO, SAN JUAN DIVISION		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this is an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	EDWIN	
	your government-issued picture identification (for	First name	First name
	example, your driver's	JAVIER	
	license or passport).	Middle name	Middle name
	Bring your picture	ORTIZ DIAZ	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2751	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)  EIN
5.	Where you live	MANSIONES DEL CARIBE AB51 RUBI ST HUMACAO, PR 00791	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Humacao	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		HC04 BOX 44952 CAGUAS, PR 00725	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	Debtor 1 ORTIZ DIAZ, EDWIN JAVIER			C	Case number (if known)			
Par	t 2:	Tell the Court About Y	our Bankruptcy Case					
7.	Banl	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choo	sing to file under	☐ Chapter 7					
			☐ Chapter 11					
			☐ Chapter 12					
			Chapter 13					
8.	How	you will pay the fee	about how you may pay. Typ	ically, if you are paying the fee yourself	h the clerk's office in your local court for more details you may pay with cash, cashier's check, or money or rney may pay with a credit card or check with a			
			I need to pay the fee in ins Filing Fee in Installments (Of		gn and attach the Application for Individuals to Pay	The		
			not required to, waive your fe your family size and you are	e, and may do so only if your income is	y if you are filing for Chapter 7. By law, a judge may, less than 150% of the official poverty line that applied you choose this option, you must fill out the <i>Applica</i> file it with your petition.	es to		
9.		you filed for	■ No.					
	bank 8 yea	ruptcy within the last ars?	☐ Yes.					
			District	When	Case number			
			District	When	Case number			
			District	When	Case number			
10.		any bankruptcy cases	■ No					
		ling or being filed by ouse who is not filing	☐ Yes.					
	this a bu	case with you, or by siness partner, or by filiate?	_ 1.55.					
			Debtor		Relationship to you			
			District	When	Case number, if known			
			Debtor		Relationship to you			
			District	When	Case number, if known			

# 11. Do you rent your residence?

■ No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

12.	Are you a sole proprietor	_	_	_	
	of any full- or part-time business?	No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, Sta	te & ZIP Code
	to this petition.		Check	the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadlines operation	s. If you ind s, cash-flo 116(1)(B). I am n	dicate that you are a w statement, and fe ot filing under Chap	court must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure in 11 oter 11.  11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and I d der Subchapter V of Chapter 11.
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and I Subchapter V of Chapter 11.
Part	Report if You Own or	Have Any	Hazardou	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is t	he hazard?	
	safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is		
					Number, Street, City, State & Zip Code

### Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 ORTIZ DIAZ, EDW	/IN JAVI	ER	Case numbe	(if known)	
Par	6: Answer These Question	ons for R	eporting Purposes			
16.	What kind of debts do you have?	16a.		sumer debts? Consumer debts are define al, family, or household purpose."	ed in 11 U.S.C.§ 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			■ Yes. Go to line 17.			
		16b.	Are your debts primarily bus for a business or investment or	nat you incurred to obtain money vestment.		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe	that are not consumer debts or business of	debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	☐ Yes.		you estimate that after any exempt property to distribute to unsecured creditors?	y is excluded and administrative expenses are	
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No			
			Yes			
18.	How many Creditors do	<b>1</b> -49		<u> </u>	<u> </u>	
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000 ☐ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000	
		☐ 100-1 ☐ 200-9		10,001-23,000	Li More marriou,000	
19.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	\$1,000,000,001 - \$10 billion	
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
Par	7: Sign Below					
For	you	I have ex	amined this petition, and I declare	e under penalty of perjury that the information	on provided is true and correct.	
				am aware that I may proceed, if eligible, ble under each chapter, and I choose to pro	under Chapter 7, 11,12, or 13 of title 11, Unite oceed under Chapter 7.	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I reques	relief in accordance with the ch	apter of title 11, United States Code, spec	rified in this petition.	
		case car	and making a false statement, co result in fines up to \$250,000, o VIN JAVIER ORTIZ DIAZ	ncealing property, or obtaining money or pr imprisonment for up to 20 years, or both.	roperty by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
		EDWIN	JAVIER ORTIZ DIAZ e of Debtor 1	Signature of Debtor	r 2	

Executed on

MM / DD / YYYY

Executed on February 20, 2020 MM / DD / YYYY

Debtor 1	ORTIZ DIAZ.	EDWIN	<b>JAVIER</b>
----------	-------------	-------	---------------

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Roberto Figueroa-Carrasquillo	Date	February 20, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Roberto Figueroa-Carrasquillo		
Printed name		
RFigueroa Carrasquillo Law Office PSC		
Firm name		
PO Box 186		
Caguas, PR 00726-0186		
Number, Street, City, State & ZIP Code		
Contact phone(787) 744-7699	Email address	rfc@rfigueroalaw.com
USDC 203614		
Bar number & State		

Fill i	n this information to	identify your case	and th	is filing:		
Debtor 1		IER ORTIZ DIA				
Debtor 2	First Name	Middle	Name	Last Name		
(Spouse, if filing)	First Name	Middle	Name	Last Name		
United States	s Bankruptcy Court for	the: DISTRICT	OF PUE	ERTO RICO, SAN JUAN DIVISION		
Case numbe	r					☐ Check if this is an amended filing
Official	Form 106A/E	ł				
	ule A/B: P	_				12/15
think it fits bes information. If Answer every Part 1: Desc	et. Be as complete and a more space is needed, question. ribe Each Residence, B	accurate as possible attach a separate shuilding, Land, or Otl	e. If two leet to th	only once. If an asset fits in more than one married people are filing together, both are easis form. On the top of any additional pages,  Estate You Own or Have an Interest In ence, building, land, or similar property?	equally responsible for	supplying correct
_	ere is the property?		What	is the property? Check all that apply		
RUBI S	MANSIONES DEL C STREE Iress, if available, or other de			Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of any sec	d claims or exemptions. Put ured claims on <i>Schedule D:</i> Claims Secured by Property.
<b>HUMA</b>	CAO PR State	00791 ZIP Code		Manufactured or mobile home  Land  Investment property	Current value of the entire property? \$137,000.0	Current value of the portion you own?
			Who	Timeshare Other has an interest in the property? Check one	Describe the nature	of your ownership interest tenancy by the entireties, or
County			□ ■ Othe	Debtor 1 and Debtor 2 only  At least one of the debtors and another r information you wish to add about this iten erty identification number:	(see instructions)	community property
			Deb Car of: 4	tor owns a residential real proper ibe AB51 Rubi Street Humacao Pu bedrooms, 2 1/2 bathrooms, livir carpot/garage.	erto Rico; this pr	operty consists
				our entries from Part 1, including any e		\$137,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debte	or 1 <u>C</u>	RTIZ DIAZ, EDWIN JAVIER	<b>!</b>	Case number (if known)	
3. <b>Ca</b>	rs. vans.	trucks, tractors, sport utility ve	ehicles, motorcycles		
		, , , , , , , , , , , , , , , , , , , ,	, ,		
	No				
•	Yes				
3.1	Make:	Jeep	Who has an interest in the property? Check one	Do not deduct secur	ed claims or exemptions. Put
		Wrangler Unlimited	_	the amount of any se	ecured claims on Schedule D:
	Model:	4WD	Debtor 1 only	Creditors Who Have	Claims Secured by Property.
	Year:	2018	Debtor 2 only	Current value of th	
		nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		1C4BJWDG7JL856198	☐ At least one of the debtors and another		
	VINIO	1C4BJWDG7JL656196	☐ Check if this is community property	\$26,960.0	00 \$26,960.00
			(see instructions)	<u> </u>	<u> </u>
3.2	Make:	Mercedes-Benz	Who has an interest in the property? Check one		ed claims or exemptions. Put
	Model:	CLA250	■ Debtor 1 only		ecured claims on Schedule D: Claims Secured by Property.
	Year:	2019	Debtor 2 only	Current value of th	
	Approxin	nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:	☐ At least one of the debtors and another		
	VIN no	WDDSJ4EB4KN712496	_	<b>COE 445</b>	00
			☐ Check if this is community property (see instructions)	\$25,445.0	00 \$25,445.00
			(See instructions)		
		Uvundoi		Do not deduct secur	ed claims or exemptions. Put
3.3	Make:	Hyundai	Who has an interest in the property? Check one	the amount of any se	ecured claims on Schedule D:
	Model:	Tucson AWD	Debtor 1 only	Creditors Who Have	Claims Secured by Property.
	Year:	2017	Debtor 2 only	Current value of th	
		nate mileage: ormation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
		KM8J23A45HU494499	At least one of the debtors and another		
	V 114 110	NW0025A45110454455	☐ Check if this is community property	\$13,706.0	00 \$13,706.00
			(see instructions)		_
	amples: B		nd other recreational vehicles, other vehicles, a tercraft, fishing vessels, snowmobiles, motorcycle a		
			vn for all of your entries from Part 2, including a		\$66,111.00
D	<b>.</b>	ha Vann Banas est est tra	4	_	
		be Your Personal and Household I	tems terest in any of the following items?		Current value of the
БО у	ou own o	i nave any legal or equitable in	Refest in any of the following items?		portion you own?  Do not deduct secured claims or exemptions.
E		goods and furnishings Major appliances, furniture, linens	, china, kitchenware		
	Yes. De	•			
			ods and Furnishings		\$2,500.00
		(beas, sotas, t	ables and others)		φ2,300.00
		One (1) refrige	erator		\$575.00
		One (1) stove	-		\$200.00
		Une (1) Stove		i	あといい.しい

Debtor 1	ORTIZ DIAZ, EDWIN JAVIER	Case number (if known)	
	One (1) washing machine		\$150.00
	One (1) dryer		\$150.00
	One (1) Emergency Gasoline Powe	r Generator 10,000W	\$300.00
□ No	ples: Televisions and radios; audio, video, stereo, and digital equip including cell phones, cameras, media players, games	oment; computers, printers, scanners; music colle	ections; electronic devices
	0.10 (1) 1.1 001.00		
Examp ■ No	tibles of value  ples: Antiques and figurines; paintings, prints, or other artwork; bo collections, memorabilia, collectibles  s. Describe	ooks, pictures, or other art objects; stamp, coin, o	r baseball card collections; other
Examp	ment for sports and hobbies  ples: Sports, photographic, exercise, and other hobby equipment; instruments  s. Describe	bicycles, pool tables, golf clubs, skis; canoes and	d kayaks; carpentry tools; musical
■ No □ Yes. 11. <b>Clothe</b> Exam □ No	mples: Pistols, rifles, shotguns, ammunition, and related equipments. Describe  nes  mples: Everyday clothes, furs, leather coats, designer wear, shoes		
Yes.	clothing and personal effects		\$800.00
12. <b>Jewel</b> i		ding rings, heirloom iewelry, watches, gems, gold	<del>.</del>
☐ No			,
■ Yes.	s. Describe  Jewelry		\$200.00
Exam ■ No □ Yes.	farm animals  mples: Dogs, cats, birds, horses  s. Describe		
■ No	other personal and household items you did not already list, s. Give specific information	including any health aids you did not list	
	I the dollar value of all of your entries from Part 3, including t 3. Write that number here		\$4,975.00
	Describe Your Financial Assets		
Do you o	own or have any legal or equitable interest in any of the follo	wing?	Current value of the

Current value of the portion you own?
Do not deduct secured claims or exemptions.

D	ebtor 1	ORTIZ DIAZ	, EDWII	N JAVIER	Case	number (if known)	
16	i. <b>Cash</b> Examp ■ No	oles: Money you h	nave in yo	ur wallet, in your home, in a	safe deposit box, and on hand when you f	file your petition	
	☐ Yes						
17					ertificates of deposit; shares in credit union he same institution, list each.	ns, brokerage houses, and other similar	
	_				Institution name:		
					Coop A/C Las Piedras		
			17.1.	Savings Account	Account no x7903 Shares and Deposit		\$3.46
					Oriental Account no x7641		
			17.2.	Checking Account			\$1.49
18	Examp  ■ No			ly traded stocks nt accounts with brokerage	firms, money market accounts		
19		blicly traded st	ock and i		and unincorporated businesses, include	ding an interest in an LLC, partnershi	p, and
	■ No						
	☐ Yes.	Give specific inf		about them me of entity:	% of	ownership:	
20	Negotia Non-ne ■ No	able instruments	include p ents are to prmation a	ersonal checks, cashiers' o hose you cannot transfer to	and non-negotiable instruments hecks, promissory notes, and money orde someone by signing or delivering them.	rs.	
21		nent or pension bles: Interests in			thrift savings accounts, or other pension	or profit-sharing plans	
	☐ Yes. I	List each accoun		ely. of account:	Institution name:		
22	Your sh		d deposits	you have made so that you	u may continue service or use from a comp tilities (electric, gas, water), telecommunic		
					Institution name or individual:		
23	a. Annuiti ■ No	es (A contract fo	r a period	ic payment of money to you	ı, either for life or for a number of years)		
	☐ Yes	Is	suer nam	ne and description.			
24		<b>s in an educatio</b> C. §§ 530(b)(1), §			d ABLE program, or under a qualified s	tate tuition program.	
	☐ Yes	lr	stitution r	name and description. Sepa	arately file the records of any interests.11 L	J.S.C. § 521(c):	
25	. Trusts, ■ No	equitable or fu	ture inter	ests in property (other the	nan anything listed in line 1), and rights	or powers exercisable for your bene	fit

Official Form 106A/B Schedule A/B: Property page 4

 $\hfill \square$  Yes. Give specific information about them...

De	ebtor 1	ORTIZ DIAZ, EDWIN JAVIER	Case number (if known)	
26.		s, copyrights, trademarks, trade secrets, and other intellectual property les: Internet domain names, websites, proceeds from royalties and licensing		
	_	Give specific information about them		
	Example ■ No	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association holdings, licenses, cooperative associati	quor licenses, professional licenses	
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you		
	☐ Yes. (	Give specific information about them, including whether you already filed the	returns and the tax years	
	■ No	support les: Past due or lump sum alimony, spousal support, child support, mainter Give specific information	nance, divorce settlement, property :	settlement
30.		mounts someone owes you  les: Unpaid wages, disability insurance payments, disability benefits, sick pay  unpaid loans you made to someone else	y, vacation pay, workers' compensat	ion, Social Security benefits;
		Give specific information		
	Examp	s in insurance policies les: Health, disability, or life insurance; health savings account (HSA); credit,	homeowner's, or renter's insurance	
	■ No □ Yes. N	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
32.		erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance police.	ey, or are currently entitled to receive p	property because someone has
	☐ Yes.	Give specific information		
33.		against third parties, whether or not you have filed a lawsuit or made a les: Accidents, employment disputes, insurance claims, or rights to sue	a demand for payment	
		Describe each claim		
34.	Other c	ontingent and unliquidated claims of every nature, including counterc	laims of the debtor and rights to s	et off claims
	☐ Yes.	Describe each claim		
35.	Any fina	ancial assets you did not already list		
	_	Give specific information		
36		he dollar value of all of your entries from Part 4, including any entries . Write that number here		\$4.95

Official Form 106A/B Schedule A/B: Property page 5

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debto	r 1 ORTIZ DIAZ, EDWIN JAVIER		Case number (if known)	
37. <b>Do</b>	you own or have any legal or equitable interest in any business-related	property?		
	lo. Go to Part 6.			
□ Y	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You On If you own or have an interest in farmland, list it in Part 1.	wn or Have an Interes	it In.	
46. <b>D</b> o	you own or have any legal or equitable interest in any farm- or	commercial fishing	-related property?	
	No. Go to Part 7.	_		
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You D	id Not List Above		
50 <b>D</b>				
	you have other property of any kind you did not already list?  xamples: Season tickets, country club membership			
	•			
	Yes. Give specific information			
54. <i>I</i>	Add the dollar value of all of your entries from Part 7. Write that r	number here		\$0.00
	<u> </u>			
Part 8	List the Totals of Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate, line 2			\$137,000.00
56. <b>F</b>	Part 2: Total vehicles, line 5	\$66,111.00	<del>-</del>	·
57. <b>F</b>	Part 3: Total personal and household items, line 15	\$4,975.00		
58. <b>F</b>	Part 4: Total financial assets, line 36	\$4.95		
59. <b>F</b>	Part 5: Total business-related property, line 45	\$0.00		
60. <b>F</b>	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>F</b>	Part 7: Total other property not listed, line 54 + _	\$0.00		
62. 1	Total personal property. Add lines 56 through 61	\$71,090.95	Copy personal property total	\$71,090.95
63. 1	Total of all property on Schedule A/B. Add line 55 + line 62			\$208,090.95

							_
	Fill in this	information to identify	y your ca	ase:			
De	ebtor 1	EDWIN JAVIER O				and Maria	
De	ebtor 2	First Name	IVI	ddle Name	L	ast Name	
1	oouse if, filing)	First Name	Mi	ddle Name	L	ast Name	
Ur	nited States Ban	kruptcy Court for the:	DISTR	ICT OF PUERTO RIC	CO, SA	AN JUAN DIVISION	
	ase number						
(if I	known)						Check if this is an amended filing
0	fficial For	m 106C					
S	chedule	C: The Pro	oper	ty You Cla	im	as Exempt	4/19
pro out	perty you listed o	on Schedule A/B: Prope	rty (Offici	al Form 106A/B) as yo	ur sou	rce, list the property that you claim a	pplying correct information. Using the as exempt. If more space is needed, fill es, write your name and case number (if
spe app fun to a	ecific dollar amo plicable statuto ds—may be un	ount as exempt. Altern ry limit. Some exempti Ilimited in dollar amou lar amount and the val	natively, ions—su nt. Howe	you may claim the fu ch as those for heal ever, if you claim an	ıll fair th aid: exemp	s, rights to receive certain benefi	ng exempted up to the amount of any ts, and tax-exempt retirement under a law that limits the exemption
Pa	art 1: Identify	the Property You Cla	im as Ex	empt			
1.	Which set of e	exemptions are you cla	aiming?	Check one only, even	if you	r spouse is filing with you.	
	☐ You are clai	ming state and federal n	onbankru	ptcy exemptions. 11	U.S.C	. § 522(b)(3)	
	■ You are clai	ming federal exemptions	s. 11 U.S	S.C. § 522(b)(2)			
2				• ( )( )	mnt f	ill in the information below.	
۷.		on of the property and line		Current value of the		ount of the exemption you claim	Specific laws that allow exemption
		nat lists this property		portion you own			
				Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		Goods and Furnish s, tables and others		\$2,500.00		\$2,500.00	11 USC § 522(d)(3)
	Line from Sche	•	•)			100% of fair market value, up to any applicable statutory limit	
	One (1) refri	_		\$575.00		\$575.00	11 USC § 522(d)(3)
	Line from Sche	edule A/B: <b>6.2</b>				100% of fair market value, up to any applicable statutory limit	
_	One (1) stov	/e		\$200.00		\$200.00	11 USC § 522(d)(3)
	Line from Sche	edule A/B. <b>6.3</b>		Ψ200.00			
					Ц	100% of fair market value, up to any applicable statutory limit	
		hing machine		\$150.00		\$150.00	11 USC § 522(d)(3)
	Line from Sche	euule A/D. <b>0.4</b>				100% of fair market value, up to any applicable statutory limit	

One (1) dryer

Line from Schedule A/B: 6.5

\$150.00

11 USC § 522(d)(3)

\$150.00

100% of fair market value, up to any applicable statutory limit

De	btor 1 OF	RTIZ DIAZ, EDWIN JAVIER			Case number (if known)	
		ription of the property and line on $A/B$ that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		Emergency Gasoline Power or 10,000W	\$300.00		\$300.00	11 USC § 522(d)(3)
		Schedule A/B. <b>6.6</b>			100% of fair market value, up to any applicable statutory limit	
		TV Set 55" Schedule A/B 7.1	\$100.00		\$100.00	11 USC § 522(d)(3)
	Line nom	Genedate A/L 1.1			100% of fair market value, up to any applicable statutory limit	
	•	g and personal effects Schedule A/B 11.1	\$800.00		\$800.00	11 USC § 522(d)(3)
	LINE HOIN	Scredule AL 11.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry	Schedule A/B 12.1	\$200.00		\$200.00	11 USC § 522(d)(4)
	Line nom	Scriedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit	
		/C Las Piedras t no x7903	\$3.46		\$3.46	11 USC § 522(d)(5)
	Shares	and Deposit Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Oriental	t no x7641	\$1.49		\$1.49	11 USC § 522(d)(5)
	Checkin	ng account Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
3.		claiming a homestead exemption of a djustment on 4/01/22 and every 3			I on or after the date of adjustment.)	
	■ No	,	•		,	
	☐ Yes.	Did you acquire the property covered	d by the exemption within	n 1.21	5 days before you filed this case?	
		No	,	.,	, , 00001	
		Yes				

			_	
Fill in this information to id	entify your case:			
Debtor 1 EDWIN JAVIE	ER ORTIZ DIAZ  Middle Name Last Name			
Debtor 2	Middle Name Last Name			
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the	ne: DISTRICT OF PUERTO RICO, SAN JUAN I	DIVISION		
Case number	_			
(if known)			☐ Check	if this is an
			ameno	led filing
Official Form 106D				
	rs Who Have Claims Secure	d by Propert	V	12/15
		<u> </u>		
needed, copy the Additional Page, fill it	e. If two married people are filing together, both are eq out, number the entries, and attach it to this form. On t			
known). 1. Do any creditors have claims securec	by your property?			
_ `	t this form to the court with your other schedules. You	have nothing else to re	port on this form.	
Yes. Fill in all of the information	·	g c.cc to re		
Part 1: List All Secured Claims	. 200			
	as more than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor	nas a particular claim, list the other creditors in Part 2. As betical order according to the creditor 's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	•	value of collateral.	claim	If any
2.1 Banco Popular de Puerto Rico	Describe the property that secures the claim:	\$149,878.00	\$137,000.00	\$12,878.00
Creditor's Name	URB MANSIONES DEL CARIBE	·	·	
	AB51 RUBI STREET, HUMACAO,			
	PR 00791 Debtor owns a residential real			
	property located at Urb Mansiones			
	del Caribe AB51 Rubi Street			
	Humacao Puerto Rico; this property consists of: 4 bedrooms, 2			
Mortgage Servicing Department	1/2 bathrooms, living &			
PO Box 362708	As of the date you file, the claim is: Check all that apply.			
San Juan, PR 00936-2708				
Number, Street, City, State & Zip Code	□ Unliquidated			
Who support he debt 0.01	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.	d		
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	bured		
Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another				
☐ Check if this claim relates to a community debt		no HU2020CV0007	78	
Date debt was incurred 2018-06	Last 4 digits of account number 6389			

Date debt was incurred 2018-09-23 Last 4 digits of account number 0001 Describe the property that secures the claim: \$24,137.00 \$13,706.00 \$10,431.00 2.4 | Oriental Bank Creditor's Name 2017 Hyundai Tucson AWD VIN no KM8J23A45HU494499 As of the date you file, the claim is: Check all that PO Box 195115 apply. San Juan, PR 00919-5115 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt

0001

Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages.

\$268,854.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$268,854.00

Last 4 digits of account number

Date debt was incurred 2017-08

Debtor	1 EDWIN JAVIER	R ORTIZ DIAZ		Case number (f known)	
	First Name	Middle Name	Last Name		
Part 2:	List Others to Be	Notified for a Debt Th	at You Already Listed		
trying to	collect from you for a	a debt you owe to somed e debts that you listed in	one else, list the creditor in Part	that you already listed in Part 1. For 11, and then list the collection agenc itors here. If you do not have addition	y here. Similarly, if you have more
R L P	ame, Number, Street, C Rivera Munich & I .cda Lisa M. Apo O Box 364908 San Juan, PR 009	Hernandez Law Off nte Valderas	fices PS	On which line in Part 1 did you enter  Last 4 digits of account number63	

Fill in this in	formation to identify your	case:					
Debtor 1	EDWIN JAVIER OR	TIZ DIAZ					
	First Name	Middle Name	Last Nam	ie		1	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nam	10			
United States B	ankruptcy Court for the:	DISTRICT OF PUEI	RTO RICO, SAN JU	AN DIVISI	ON	1	
Case number							
(if known)						☐ Check	if this is an
						amend	ed filing
Official For	m 106E/E						
	E/F: Creditors Wh	o Hayo Hac	soured Claim	c			12/15
he Continuation case number (if k	Have Claims Secured by Prop Page to this page. If you have nown).  All of Your PRIORITY Unse	no information to rep					
	tors have priority unsecured of						
□ No. Go to	· ·	g ,					
Yes.							
identify what possible, list to 1. If more that	ur priority unsecured claims. It type of claim it is. If a claim has the claims in alphabetical order an one creditor holds a particular nation of each type of claim, see	ooth priority and nonpri according to the credito claim, list the other cre	ority amounts, list that or r's name. If you have n ditors in Part 3.	claim here a nore than tv	and show both priority a	nd nonpriority amounts aims, fill out the Contin	s. As much as nuation Page of Part  Nonpriority
2.1 ASUM	_	Loot 4 digi	ts of account number	0504	¢0 277 74	amount	amount
7.00	Creditor's Name	Last 4 digi	is of account number	0324	\$8,277.74	\$8,277.74	\$0.00
		When was	the debt incurred?			_	
	ox 11218 uan, PR 00910-2318						
	Street City State Zip Code	As of the c	late you file, the claim	is: Check	all that apply		
Who incurr	ed the debt? Check one.	☐ Conting	ent				
Debtor 1	only	☐ Unliquid	dated				
Debtor 2	? only	■ Dispute	d				
Debtor 1	and Debtor 2 only		- RIORITY unsecured cla	aim:			
☐ At least	one of the debtors and another	■ Domest	ic support obligations				
_	f this claim is for a community		and certain other debts	VOLLOWE the	a anvernment		
	subject to offset?	_ :	for death or personal in				
□ No		☐ Other. S					
Yes		_ 00	-1 - 27				

Deb	tor 1 ORTIZ DIAZ, EDWIN JAVIER		Case nu	mber (f known)		
2.2	Departamento de Hacienda Priority Creditor's Name	Last 4 digits of account number	2751	\$1,584.00	\$1,584.00	\$0.00
	Bankruptcy Section 235 Ave Arterial Hostos Ste 1504 San Juan. PR 00918-1451	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts y □ Claims for death or personal inj	_			
	■ No □ Yes	Other. Specify				
Par	List All of Your NONPRIORITY Unsecur	ed Claims				
3.	Do any creditors have nonpriority unsecured claims	s against you?				
	lacksquare No. You have nothing to report in this part. Submit the	his form to the court with your other s	chedules.			
	Yes.					
	List all of your nonpriority unsecured claims in the aunsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other of 2.	aim. For each claim listed, identify wh	at type of clai	m it is. Do not list claims	already included in Pa	rt 1. If more
					Total cla	im
4.1	Asoc Residentes Mansiones del Caribe Inc	Last 4 digits of account numb	er AB51			\$2,018.82
	Nonpriority Creditor's Name	When was the debt incurred?				
	175 Calle Aquamarina					
	Humacao, PR 00791  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the cla	m is: Check	all that apply		
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsect	ıred claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a s report as priority claims			ou did not	
	■ No	☐ Debts to pension or profit-sh	aring plans, a	nd other similar debts		
	☐ Yes	■ Other. Specify Civil no	HU2020C	V00038		

ORTIZ DIAZ, EDWIN JAVIER		Case number (if known)	
Autoridad Acueductos Y Alcantarillados	Last 4 digits of account number	4728	\$1,245.2
Nonpriority Creditor's Name	When was the debt incurred?		
PO Box 70101 San Juan, PR 00936-8101 Number Street City State Zip Code	As of the date you file, the claim is	as Charle all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	<b>5.</b> Опеск ан тас арргу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
Autoridad de Energia Electrica Nonpriority Creditor's Name	Last 4 digits of account number	6865	\$845.3
	When was the debt incurred?		
PO Box 363508 San Juan, PR 00936-3508		as Charles II short and h	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан mat арріу	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Cap1/wmt	Last 4 digits of account number	8787	\$290.0
Nonpriority Creditor's Name	When was the debt incurred?	2019-04	
PO Box 30281	when was the dept incurred:	2019-04	
Salt Lake City, UT 84130-0281			
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		

Cbna	Last 4 digits of account number	8727	\$2,510.0
Nonpriority Creditor's Name	- When was the debt incurred?	2019 11	, ,
PO Box 6497	when was the dept incurred?	2018-11	
Sioux Falls, SD 57117-6497			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
 Citi	Last 4 digits of account number	2247	\$3,515.0
Ionpriority Creditor's Name	_		¥ - <b>/</b>
O Box 6190	When was the debt incurred?	2018-11	
Sioux Falls, SD 57117-6190			
umber Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Vho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng pians, and other similar debts	
☐ Yes	Other. Specify		
ОТОР	Last 4 digits of account number	2751	\$16.0
onpriority Creditor's Name	When was the debt incurred?		
O Box 41269 Minillas Station	when was the dept incurred?		
San Juan, PR 00940-1269			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		

debt

■ No

☐ Yes

report as priority claims

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Ticket no 38651908

Is the claim subject to offset?

Debto	or 1 ORTIZ DIAZ, EDWIN JAVIER		Case number (if known)					
4.8	Empresas Berrios Inc Nonpriority Creditor's Name	Last 4 digits of account number	2302	\$171.00				
	PO Box 674 Cidra, PR 00739-0674	When was the debt incurred?	2014-08					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes							
4.9	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	7449	\$561.00				
	recipitotity diseases a realise	When was the debt incurred?	2019-07					
	3820 N Louise Ave							
	Sioux Falls, SD 57107-0145  Number Street City State Zip Code	As of the date you file, the claim	e. Chack all that apply					
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed	d alaim.					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a ciaim:					
	☐ Check if this claim is for a community debt	_						
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other. Specify						
		— Other: Specify						
4.10	Firstbank Puerto Rico Nonpriority Creditor's Name	Last 4 digits of account number	5387	\$10,303.00				
		When was the debt incurred?	2018-12-31					
	PO Box 11856							
	San Juan, PR 00910-3856  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.	• •	3. Oncok all that apply					
	■ Debtor 1 only	☐ Contingent☐ Unliquidated						
	Debtor 2 only							
	Debtor 1 and Debtor 2 only							
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify						

Debto	ORTIZ DIAZ, EDWIN JAVIER	Case number (f known)						
4.11	Firstbank Puerto Rico Nonpriority Creditor's Name	Last 4 digits of account number	3160	\$7,555.73				
	Nonpholity Creditor's Name	When was the debt incurred?						
	PO Box 11856 San Juan, PR 00910-3856 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	Пол						
	_	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.					
	At least one of the debtors and another	Student loans	a ciaim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not					
		Debts to pension or profit-sharir	ag plane, and other cimilar debte					
	■ No							
	Yes	Other. Specify Car deficie	ency balance (Mit Lancer 2006)					
4.12	Money Express Nonpriority Creditor's Name	Last 4 digits of account number	9110	\$4,889.00				
	Nonpholity Ground's Name	When was the debt incurred?	2018-11-15					
	PO Box 9146 San Juan, PR 00908-0146 Number Street City State Zip Code	- As of the data you file the claim						
	Who incurred the debt? Check one.	As of the date you me, the claim	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Пол						
	_	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed	Little					
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	No	Debts to pension or profit-sharir	og plane, and other similar debts					
	Yes	<u>_</u>	ig plans, and other similar debts					
	⊔ Yes	Other. Specify						
4.13	Oriental Bank Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$14,386.00				
	Nonpholity Croalities (Name	When was the debt incurred?	2019-10					
	PO Box 195115							
	San Juan, PR 00919-5115							
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	_						
	Debtor 1 only	☐ Contingent☐ Unliquidated						
	Debtor 2 only							
	Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	Check if this claim is for a community debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other, Specify						

Debtor 1	ORTIZ DI	AZ, EDWIN JAVIER		Case no	umber (f known)						
	Oriental Ba		Last 4 digits of account number	er <u>6026</u>	i	\$49.00					
1	Nonpriority Creditor's Name		When was the debt incurred?	2018	-07						
ı	PO Box 195	52		2010	01						
	Humacao, I										
		City State Zip Code: the debt? Check one.	As of the date you file, the clair	m is: Check	all that apply						
	Debtor 1 onl		☐ Contingent								
		•		☐ Unliquidated							
	Debtor 2 onl	•	<u> </u>								
		d Debtor 2 only of the debtors and another	■ Disputed  Type of NONPRIORITY unsecu	red claim:							
_		s claim is for a community	Student loans	rea ciaiii.							
	iebt	s claim is for a community	Obligations arising out of a se	naration an	reement or divorce that you did r	not					
I	s the claim su	bject to offset?	report as priority claims	paramorr ag	. comen er arrenee anat yeu alu n						
I	No		Debts to pension or profit-sha	ring plans,	and other similar debts						
I	☐Yes		Other. Specify								
Part 3:	I ist Others	to Be Notified About a De	ebt That You Already Listed								
			about your bankruptcy, for a debt that	t vou alread	dy listed in Parts 1 or 2. For ex:	ample if a collection agency					
is trying have m	to collect fro ore than one c	m you for a debt you owe to s	someone else, list the original creditor at you listed in Parts 1 or 2, list the ad	in Parts 1 o	or 2, then list the collection age	ency here. Similarly, if you					
Name and	l Address		On which entry in Part 1 or Part 2 did y	ou list the o	riginal creditor?						
	Cintron Flores Law Office		Line 4.1 of (Check one):		Creditors with Priority Unsecured						
PO Box		ntron Flores		Part 2:	Creditors with Nonpriority Unsecu	ured Claims					
	on, PR 009	58-1133									
	-		Last 4 digits of account number	Α	B51						
Name and			On which entry in Part 1 or Part 2 did y	ou list the o	riginal creditor?						
		Systems LLC	Line 4.11 of (Check one):	☐ Part 1:	Creditors with Priority Unsecured	Claims					
PO Box	( 7999 Ioud, MN 5	6302-7000		Part 2:	Creditors with Nonpriority Unsecu	ured Claims					
Jann U	iouu, iiii o	0302-1333	Last 4 digits of account number	3	160						
Name and	l Address		On which entry in Part 1 or Part 2 did y	ou list the o	riginal creditor?						
		s Ugartemendia	Line 4.1 of (Check one):	☐ Part 1: 0	Creditors with Priority Unsecured	Claims					
		smeralda Apt 132		Part 2:	Creditors with Nonpriority Unsecu	ured Claims					
Guayna	abo, PR 009	969-4282	Last 4 digits of account number	Α	B51						
Name and	l Δddress		On which entry in Part 1 or Part 2 did y	ou list the o	riginal creditor?						
		dez Law Offices,	Line 4.11 of (Check one):		Creditors with Priority Unsecured	Claims					
P.S.C.				Part 2:	Creditors with Nonpriority Unsecu	ured Claims					
PO Box	_	26 0540									
San Ju	an, PR 009	30-0310	Last 4 digits of account number	3	160						
	•		la a a como d'Oladas								
Part 4:		nounts for Each Type of U									
	e amounts of unsecured cla		aims. This information is for statistica	ı reporting	purposes only. 28 U.S.C. §159.	Add the amounts for each					
					Total Claim						
	6a.	Domestic support obligation	ns	6a.	\$ 8,277	′.7 <b>4</b>					
Total clai		Tana and 1 (1)	As area and the second second	01							
from Part		Taxes and certain other deb		6b.	\$ 1,584						
	6c. 6d.	· · · · · · · · · · · · · · · · · · ·	If injury while you were intoxicated nsecured claims. Write that amount here.	6c. 6d.		0.00					
	ou.	Salet. Add all other priority di	noccarca ciaims. Write that amount here.	ou.	Φ	0.00					
	6e.	Total Priority. Add lines 6a th	nrough 6d.	6e.	\$ 9.861	.74					

Total Claim

### Debtor 1 ORTIZ DIAZ, EDWIN JAVIER

	OKTIZ DIAZ, EDWIN DAVIEK							
	6f.	Student loans						
Total claims								
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	6h.	Debts to pension or profit-sharing plans, and other similar debts						
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.						
	6j.	Total Nonpriority. Add lines 6f through 6i.						

Case number (f known)

0.	\$ 6f.	0.00
0.	\$ 6g.	0.00
0.	\$ 6h.	0.00
48,355.	\$ 6i.	48,355.14
48,355.	\$ 6j.	48,355.14

Fill in this information to identify your case:						
Debtor 1	EDWIN JAVIER C	RTIZ DIAZ				
	First Name	Middle Name	Last Name	— )	•	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF PUERTO	RICO, SAN JUAN DIVISION			
Case number _ (if known)						Check if this is an amended filing

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 FirstBank/Leasing
Departamentos de Autos
PO Box 11852
San Juan, PR 00910-1852

State what the contract or lease is for

Car lease: 2018 Jeep Wrangler Unlimited Sport; \$667.00
per month

Fill in	this information to identi	y your case:			
Debtor 1	EDWIN JAVIER O	RTIZ DIAZ			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	DISTRICT OF PUERTO	RICO, SAN JUAN DIVIS	SION	
Case number					
(if known)					Check if this is an amended filing
Official F	orm 106H				
	e H: Your Cod	ebtors			12/15
are filing toget and number the	her, both are equally resp	onsible for supplying cor the left. Attach the Addition	rect information. If mor	e space is needed, co	e as possible. If two married people opy the Additional Page, fill it out, ditional Pages, write your name and
1. Do you	have any codebtors? (If y	ou are filing a joint case, do	not list either spouse as a	a codebtor.	
□ No ■ Yes					
		lived in a community prop New Mexico, Puerto Rico,			states and territories include Arizona,
☐ No. Go		se, or legal equivalent live wit	th you at the time?		
□ N ■ Y					
	In which community state YILLMARIE SEPULY	• •	PR	Fill in the name a	nd current address of that person.
	MANSIONES DEL C HUMACAO, PR 0079	ARIBE AB51 RUBI ST			
	Name of your spouse, former sp Number, Street, City, State & Zip				
line 2 agai	n as a codebtor only if the nedule E/F (Official Form	at person is a guarantor o	or cosigner. Make sure	you have listed the ci	with you. List the person shown in reditor on Schedule D (Official Forn le E/F, or Schedule G to fill out
	mn 1: Your codebtor , Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
2.4		· ·		Пол	•
	narie Sepulveda Mora Isiones Del Caribe AE			☐ Schedule D, I	
	nacao, PR 00791			■ Schedule E/F □ Schedule G	, IIII <del>C</del>
					es Mansiones del Caribe Inc

Fill	in this information to identify your ca	se:							
Del	otor 1 <b>EDWIN JAVI</b>	ER ORTIZ DIAZ			_				
_	otor 2				-				
Uni	ted States Bankruptcy Court for the:	DISTRICT OF PUERT	ΓΟ RICO, SAN JUAN		_				
	se number lown)						d filing	postpetition (	chapter 13
0	fficial Form 106I				_	/M / DD/ Y		ing data.	
	chedule I: Your Inco	ome			IV	ז וטט / וווווו	111		12/1
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O  Describe Employment	spouse is not filing wit	h you, do not include	informat	ion about y	our spou	se. If more	space is ne	eded,
1.	Fill in your employment information.		Debtor 1	Debtor 1		Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status*	■ Employed			■ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	See Schedule A	ttached		Labora	tory Assi	stant	
	Include part-time, seasonal, or self-employed work.	Employer's name				Labora	torio Clin	ico Borino	uen Inc
	Occupation may include student o homemaker, if it applies.	Employer's address				Baldori Caguas	oty 2 s, PR 0072	25	
Par	t 2: Give Details About Mon	How long employed the		achment fo	or Addition		0 months ment Infor		
Esti	mate monthly income as of the da		ou have nothing to repo	ort for any	line, write \$0	) in the spa	ace. Include	your non-filir	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this forr		oine the information for	all employ	ers for that	person on	the lines be	low. If you ne	ed more
					For Del	otor 1	For Deb	tor 2 or ng spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$2	,366.48	\$	1,093.47	
3.	Estimate and list monthly overting	ne pay.		3	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$ 2,30	66.48	\$1	,093.47	

Case number (if known)

					For Debtor 1		btor 2 or ing spouse	
	Сору	line 4 here	4.	\$_	2,366.48	\$	1,093.47	
5.	List a	ıll payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	208.60	\$	85.42	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: 401KBT	5h.+	\$	0.00 +	\$	9.86	
6.	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	208.60	\$	95.28	
7.	Calcu	late total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,157.88	\$	998.19	
8.	List a 8a.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	0h	Interest and dividends	oa. 8b.	\$_	0.00	\$	0.00	
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent		Φ_	0.00	Φ	0.00	
	ос.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: Christmas Bonus \$600.00/12	8h.+	\$_	50.00 +	\$	0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	50.00	\$	0.00	
10	Calcu	ulate monthly income. Add line 7 + line 9.	10. \$		2,207.88 + \$	909	3,206.0	7
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			2,207.00	330	3,200.0	~
11.	Includ other	all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your diffriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not avify:	ependent		•	Schedule —	J. 11. +\$0.0	00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain					12. \$ 3,206.0 Combined monthly income	
13.	Do yo	ou expect an increase or decrease within the year after you file this form	?				monding moonie	
		No.						
		Yes. Explain:						$\neg$

### Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation	Car Seller	
Name of Employer	Consorcio Inversionista Automotriz Inc	
How long employed	4 years	
Address of Employer	PMB 428 PO Box 6400	
	Cayey, PR 00737	
Debtor		
Occupation	Commissions Car Salesman	
Name of Employer	Consorcio Inversionista Automotriz Inc	
How long employed	5 years	
Address of Employer	PMB 428 PO Box 6400	
	Cavey, PR 00737	

Debtor 1   EDWIN JAVIER ORTIZ DIAZ   Check if this is:   An amended filing   A superment showing posperition chapter 13 expenses as of the following date:   MM / DD / YYYY	Fill	in this information to identify yo	ur case:				
Described   Page   A supplement showing postpetition chapter 13 (aspones)   A supplement showing postpetition chapter 14 (aspones)   A supplement showing postpetit	Deb	tor 1 EDWIN JAVI	ER ORTIZ DIAZ		Check	c if this is:	
United States Bankruptcy Court for the DISTRICT OF PUERTO RICO, SAN JUAN DIVISION   DISTRICT OF PUERTO RICO, SAN JUAN DIVISION   MM / DD / YYYY   MM / DD / YYYY			-		_	•	
United States Bankruptcy Court for the:  DISTRICT OF PUERTO RICO, SAN JUAN DIVISION  Official Form 106J  Schedule J: Your Expenses  12/15  Be as complete and accurate as possible, if two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (it known). Answer every question.  Part 1:  Describe Your Household  I to this a joint case?  No. Go to line 2.  Yes. Deso Debtor 2 live in a separate household?  No. Do not list Debtor 1 and Debtor 2.  Do you have dependents?  No Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Daughter  10  No Yes Son  9  Yes No							
Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    No	` .		DISTRICT OF BUEDTS BISS S		_	•	
Official Form 106J Schedule J: Your Expenses  Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part I: Describe Your Household  I Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No Do not list Debtor 1 and Yes.  Po Do not list Debtor 1 and Yes.  Fall out this information for each dependent.  Debtor 2.  Do not state the dependents names.  Daughter  10 Pyes  Son Pyes  Son Pyes  No	Unit	ed States Bankruptcy Court for the:	•	AN JUAN	Ŋ	MM / DD / YYYY	
Official Form 106J Schedule J: Your Expenses  Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part I: Describe Your Household  I Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No Do not list Debtor 1 and Yes.  Po Do not list Debtor 1 and Yes.  Fall out this information for each dependent.  Debtor 2.  Do not state the dependents names.  Daughter  10 Pyes  Son Pyes  Son Pyes  No		1					
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part     Describe Your Household							
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part     Describe Your Household	Ì						
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part     Describe Your Household	$\bigcirc$	fficial Form 106 I					
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 12							
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part !: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2.  Do you have dependents?  Do not list Debtor 1 and Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Do not state the dependents names.  Daughter  Daughter  10  Yes.  Son  9  Yes.  No.			-	. filim m to mother in oth			
Is this a joint case?   No. Go to line 2.   Yes. Does Debtor 2 live in a separate household?   No	info	ormation. If more space is need	eded, attach another sheet to this for				
Is this a joint case?   No. Go to line 2.   Yes. Does Debtor 2 live in a separate household?   No	Par	Describe Your House	hold				
Ves. Does Debtor 2 live in a separate household?   Ves. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.   Do you have dependents?							
No   Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Householdol Debtor 2.  2. Do you have dependents?   No   Debtor 1 and Debtor 2.    Do not list Debtor 1 and Debtor 2.   Pyes. Fill out this information for Debtor 1 or Debtor 2   Dependent's relationship to Debtor 2.   Do not state the dependents names.   Daughter   10   No   No   Pyes		■ No. Go to line 2.					
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Householdol Debtor 2.    Do you have dependents?		☐ Yes. Does Debtor 2 live in	n a separate household?				
2. Do you have dependents?		= :::					
Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Do not state the dependents names.  Do not state the dependents names.  Daughter  10  Yes  No No No Yes  3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income  Your expenses  10  Pependent's age No No No No Yes No No No Yes  2.  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income  Your expenses  4. \$ 866.00  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.000 4d. Homeowner's association or condominium dues 4d. \$ 0.000 4d. Homeowner's association or condominium dues		☐ Yes. Debtor 2 mus	st file Official Form 106J-2, Expenses	for Separate Househ	old of Debtor	2.	
Debtor 2.  Debtor 1 or Debtor 2 age live with you?  Do not state the dependents names.  Daughter  10  Yes  No No No Son 9  Yes No No Yes No No Yes  Son Parize Estimate Your Ongoing Monthly Expenses  Estimat	2.	Do you have dependents?	□ No				
Daughter    Daughter   10   Yes						•	
dependents names.    Daughter		Do not state the					□No
Son 9 Yes   No   No   Yes   Yes   No   Yes   Yes   No   Yes   Yes   No   Yes   Ye				Daughter		10	Yes
3. Do your expenses include expenses of people other than yourself and your dependents?  Estimate Your Ongoing Monthly Expenses  Estimate Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues				_		_	
3. Do your expenses include expenses of people other than yourself and your dependents?    Part 2:				Son		9	
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 0.00							
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues						-	
expenses of people other than yourself and your dependents?    Part 2:							
Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 866.00  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 80.00	3.		■ No				
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues			- IIVes				
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues	Por	t 2: Estimate Vour Ongoir	ng Monthly Evnonces				
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues	Est exp	imate your expenses as of your expenses as of a date after the b	our bankruptcy filing date unless yo				
Value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Seminary of the ground or lot.  4d. Seminary	•						
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  4d. \$  0.00  4d. Homeowner's association or condominium dues							
payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Someowner's association or condominium dues  4d. Someowner's association or condominium dues  4d. Someowner's association or condominium dues	(Off	ficial Form 106l.)				Your expe	enses
If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. 80.00	4.			nclude first mortgage	4. \$		866.00
4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. S  0.00		, ,	ground or lot.				
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  80.00		It not included in line 4:					
4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  80.00							0.00
4d. Homeowner's association or condominium dues 4d. \$ 80.00		' ''					
	5.			ne equity loans			

ebtor 1	ORTIZ DIAZ, EDWIN JAVIER	Case num	ber (if known)	
1 14:1	ities:			
. <b>Uti</b> l 6a.	Electricity, heat, natural gas	6a.	\$	90.00
6b.	Water, sewer, garbage collection	6b.	\$	50.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	175.00
6d.	Other. Specify: Gas (dryer & stove)	6d.	\$	15.00
	od and housekeeping supplies	— 7.	\$	170.00
	Idcare and children's education costs	8.	\$	180.00
	thing, laundry, and dry cleaning	9.	\$	
	sonal care products and services		\$	25.00
	•	10.	·	45.07
	dical and dental expenses  nsportation. Include gas, maintenance, bus or train fare.	11.	\$	0.00
	not include car payments.	12.	\$	152.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
	aritable contributions and religious donations	14.	\$	0.00
	urance.			
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
	ı. Life insurance	15a.	\$	0.00
15b	b. Health insurance	15b.	\$	0.00
150	v. Vehicle insurance	15c.	\$	0.00
150	I. Other insurance. Specify:	15d.	\$	0.00
. Tax	res. Do not include taxes deducted from your pay or included in lines 4 or 20.		-	
Spe	ecify:	16.	\$	0.00
	tallment or lease payments:			
	. Car payments for Vehicle 1	17a.	\$	667.00
	o. Car payments for Vehicle 2	17b.	\$	461.00
	c. Other. Specify:	17c.	\$	0.00
	I. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report as		¢	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Her payments you make to support others who do not live with you.	18.	\$ \$	
		19.	Φ	0.00
	ecify: her real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		r Income	
	i. Mortgages on other property	20a.		0.00
	o. Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	I. Maintenance, repair, and upkeep expenses	20d.		0.00
	e. Homeowner's association or condominium dues	20a. 20e.	\$	0.00
	ner: Specify:	206.		
. Оп	ег. ореспу.		-Ψ	0.00
. Cal	culate your monthly expenses			
	a. Add lines 4 through 21.		\$	2,996.07
22t	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	2,996.07
) Cal	oulate your menthly not income			<u>.</u>
	culate your monthly net income.  . Copy line 12 (your combined monthly income) from Schedule I.	23a.	¢	3,206.07
	Copy your monthly expenses from line 22c above.	23a. 23b.	·	
230	b. Copy your monthly expenses from the ZZC above.	∠30.	-φ	2,996.07
230	Subtract your monthly expenses from your monthly income.			
200	The result is your monthly net income.	23c.	\$	210.00
	· <b>,</b> · · · · · · · · · · · · · · · · · · ·			
For	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?  No.			or decrease because of a
	Ves Explain here:			

Fill in this inf	formation to identify ye	aur agga			
	•				
Debtor 1	EDWIN JAVIER C	Middle Name	Last Name		
Debtor 2				(	
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF PUERT	ΓΟ RICO, SAN JUAN D	IVISION	
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form	106Doc				
				0-1-1-1	
Declarat	ion About a	an Individua	al Debtor's	Schedules	12/15
If two married peo	ople are filing together	, both are equally respo	onsible for supplying o	correct information.	
obtaining money		n connection with a ban			ent, concealing property, or or imprisonment for up to 20
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an atto	rney to help you fill ou	ut bankruptcy forms?	
■ No					
Yes. Name of person  Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)					
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.					
X /s/ FDW	VIN JAVIER ORTIZ [	DIAZ	X		
EDWIN	JAVIER ORTIZ DIA e of Debtor 1			re of Debtor 2	
<b>5</b>					

Date \_\_\_\_

Date February 20, 2020

	Fill in this	information to identi	fy your case:				
Dah					4		
Deb	otor 1	EDWIN JAVIER C	Middle Name	Last Name	}		
	otor 2						
(Spoi	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Bank	cruptcy Court for the:	DISTRICT OF PUERTO	O RICO, SAN JUAN DIVISION			
Cas	e number						
(if kn	own)					_	if this is an
						amen	ded filing
	–	4000					
		m 106Sum					
				nd Certain Statistical Informa			12/15
				are filing together, both are equally response e information on this form. If you are filing			
				the box at the top of this page.			,
Part	1: Summar	rize Your Assets					
						Your a	ssets
						Value o	f what you own
1.	Schedule A/E	3: Property (Official Fo	orm 106A/B)			•	127 000 00
	1a. Copy line	55, Total real estate, f	rom Schedule A/B			\$	137,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B.			\$	71,090.95
	1c. Copy line	63, Total of all property	y on Schedule A/B			\$	208,090.95
Part	2: Summar	rize Your Liabilities					
						Your li	abilities
							you owe
2.	Schedule D: 0	Creditors Who Have Cl	aims Secured by Property	(Official Form 106D)			
	2a. Copy the t	total you listed in Colu	mn AA <i>mount of claim,</i> at th	e bottom of the last page of Part 1 of Schedule	D	\$	268,854.00
3.			Unsecured Claims (Official			œ.	9,861.74
	3a. Copy the	total claims from Part	1 (priority unsecured clain	ns) from line 6e oschedule E/F		\$	9,001.74
	3b. Copy the	total claims from Part	2 (nonpriority unsecured of	laims) from line 6j of chedule E/F		\$	48,355.14
				Your total I	labilities	<b>*</b>	327,070.88
Dow	0		P				
Part	Summar	rize Your Income and	Expenses				
4.		our Income(Official Fombined monthly incom				\$	3,206.07
5.		our Expenses (Official nthly expenses from lin	,			\$	2,996.07
Part	4: Answer	These Questions for	Administrative and Stati	stical Records			
6.	Are you filing	g for bankruptcy unde	er Chapters 7, 11, or 13?				
			•	eck this box and submit this form to the court w	ith your ot	her schedu	les.
	■ Yes						
7.	What kind of	debt do you have?					

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_3,709.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
From Fait 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	8,277.74
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,584.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	9,861.74

	Fill in this	s information to identi	ty your case:			
Deb	otor 1	EDWIN JAVIER First Name	ORTIZ DIAZ  Middle Name	Last Name		
Deb	otor 2	ristrano	Widdle Hame	Edot Namo		
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	DISTRICT OF PUERTO	RICO, SAN JUAN DIVISION		
	se number				-	heck if this is an mended filing
Sta		of Financial	Affairs for Individ			4/19
info	rmation. If m				qually responsible for supply additional pages, write your r	
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried				
2.	During the la	st 3 years, have you	lived anywhere other than w	where you live now?		
	■ No □ Yes. Lis	t all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.		
	Debtor 1 Pri	ior Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> state					y property state or territory? co, Texas, Washington and Wis	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Offic	cial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.					
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,421.00	☐ Wages, commissions, bonuses, tips	
☐ Operating a			☐ Operating a business		☐ Operating a business	

Debtor 1 OF	RTIZ DIAZ, EDWIN .	JAVIER	Cas	e number (if known)		
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
or last calendanuary 1 to	dar year: December 31, 2019 )	■ Wages, commissions, bonuses, tips	\$27,159.10	☐ Wages, combonuses, tips	missions,	
		☐ Operating a business		☐ Operating a	business	
	lar year before that: December 31, 2018)	■ Wages, commissions, bonuses, tips	\$46,676.00	☐ Wages, combonuses, tips	missions,	
		☐ Operating a business		☐ Operating a	business	
■ No	ource and the gross inc	come from each source separatel	y. Do not include income that	you listed in line 4.		
		Dobton 4		Dobtov 2		
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below.		Gross income (before deductions and exclusions)
	Debtor 1's or Debtor	u Made Before You Filed for B 2's debts primarily consumer of Debtor 2 has primarily consur	debts?	are defined in 11 U	.S.C. § 101(8	s) as "incurred by an
	, ,	a personal, family, or household propertion for bankruptcy, did	•	\$6.925* or more?		
	No. Go to line		you pay any creation a total or	φο,ο25 οι ποιο:		
	Yes List below creditor. I	v each creditor to whom you paid Do not include payments for don to an attorney for this bankrupto	nestic support obligations, su			
		nt on 4/01/22 and every 3 years a		after the date of ad	justment.	
Yes.		or both have primarily consur fore you filed for bankruptcy, did		\$600 or more?		
	No. Go to line	<del>2</del> 7.				
	payments	v each creditor to whom you paid for domestic support obligations ruptcy case.		•	•	
Creditor'	s Name and Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	ayment for
<i>Insiders</i> in which you	clude your relatives; any are an officer, director, p	or bankruptcy, did you make a general partners; relatives of any person in control, or owner of 20% oprietor. 11 U.S.C. § 101. Include	payment on a debt you ow general partners; partnership or more of their voting secur	red anyone who wos of which you are rities; and any man	a general pa aging agent, i	rtner; corporations of ncluding one for a

Total amount paid

**Dates of payment** 

Amount you

still owe

Reason for this payment

Insider's Name and Address

Del	ebtor 1 ORTIZ DIAZ, EDWIN JAVIER		Case	e number (if known)		
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cosign		yments or transfer an	y property on acc	count of a debt	that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupton List all such matters, including personal injury of and contract disputes.					
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Banco Popular de Puerto Rico vs. Edwin Javier Ortiz Diaz, Yillmarie Sepulveda Morales et.als. HU2020CV00078	Collection of Monies and foreclosure	PR First Instanc		■ Pending □ On appeal □ Concluded	
	Asociacion de Residentes Mansiones del Caribe Inc. vs. Edwin Javier Ortiz Diaz et.als. HU2020CV00038	Collection of Monies	PR First Instand Court/Humacad		Pending On appeal Concluded	
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, for	eclosed, garnish	ed, attached, se	eized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene	ed			property
	Firstbank Puerto Rico PO Box 11856	2006 Mitsubishi La	ncer	2009	1	\$0.00
	San Juan, PR 00910-3856	<ul><li>■ Property was repossessed.</li><li>□ Property was foreclosed.</li><li>□ Property was garnished.</li></ul>				
		☐ Property was attached	ed, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becall No		cluding a bank or final	ncial institution, s	set off any amo	unts from your
	Creditor Name and Address	Describe the action th	e creditor took		action was	Amount
12	Within 1 year hefere you filed for headquart	ov was any of your prop	arty in the possession	taken		of craditors a
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a		erty in the possession	ii oi aii assiynee	ioi the benefit (	n creditors, a
	■ No □ Yes					
	L 153					

Case number (if known)

Debtor 1

ORTIZ DIAZ, EDWIN JAVIER

Yes. Fill in the details.

Name of Financial Institution Describe the contents Who else had access to it? Do you still Address (Number, Street, City, State have it? Address (Number, Street, City, State and ZIP Code) and ZIP Code)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for

De	ebtor 1 ORTIZ DIAZ, EDWIN JAVIER		Case number (if known)					
	someone.							
	<b>.</b>							
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pa	art 10: Give Details About Environmental Inform	nation						
For	r the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a controlling the cleanup of these substances, wastes, w	air, land, soil, surface water, groundw						
	Site means any location, facility, or property as own, operate, or utilize it, including disposal sit		w, whether you now own, operate, or	utilize it or used to				
	Hazardous material means anything an environ material, pollutant, contaminant, or similar term		waste, hazardous substance, toxic su	bstance, hazardous				
Rep	port all notices, releases, and proceedings that ye	ou know about, regardless of when t	hey occurred.					
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable o	under or in violation of an environme	ntal law?				
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	y release of hazardous material?						
	■ No.							
	■ No □ Yes. Fill in the details.							
	Name of site	Governmental unit	Environmental law, if you	Date of notice				
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it					
26.	Have you been a party in any judicial or admini	istrative proceeding under any envir	onmental law? Include settlements a	nd orders.				
	■ No							
	Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pa	art 11: Give Details About Your Business or Cor	nnections to Any Business						
			of the following connections to any	husiness?				
	, , , , , , , , , , , , , , , , , , , ,	ithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	itive of a corporation						
	☐ An owner of at least 5% of the voting or	•						
		, ,						

	■ No. None of the above applies. Go to F	Part 12.	
	☐ Yes. Check all that apply above and fill	I in the details below for each business.	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.  No Yes. Fill in the details below.	tcy, did you give a financial statement to an	yone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
true bank 18 U		e statement, concealing property, or obtain	eclare under penalty of perjury that the answers are ing money or property by fraud in connection with a oth.
	WIN JAVIER ORTIZ DIAZ nature of Debtor 1	Signature of Debtor 2	
Dat	e _February 20, 2020	Date	
Did y ■ N □ Y		ent of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
	you pay or agree to pay someone who is not	t an attorney to help you fill out bankruptcy	forms?
■N		untou Potition Proporario Notice Postantian and	d Signature (Official Form 110)
uΥ	es. Name of Person . Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, an	u Signature (Official Form 119).

Case number (if known)

Debtor 1 ORTIZ DIAZ, EDWIN JAVIER

Fill in this information to identify your case:					
Debtor 1	EDWIN JAVIER ORTIZ DIAZ				
Debtor 2 (Spouse, if filing)					
United States Ba	ankruptcy Court for the:	District of Puerto Rico, San Juan Division			
Case number (if known)					

Check	Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
•	Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income** and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. §

				 umn A tor 1	Debt	mn B or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissio	ns (before all	\$ 2,557.90	\$	1,261.70
<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	le payme	ents from a	a spouse if	\$ 0.00	\$	0.00
All amounts from any source which are regularly point you or your dependents, including child support or an unmarried partner, members of your household oommates. Do not include payments from a spouse sted on line 3	<b>rt.</b> Includ d, your de	e regular ependents	contributions , parents, and	\$ 0.00	\$	0.00
et income from operating a business, ofession, or farm	Debto	r 1				
ross receipts (before all deductions)	\$_	0.00				
dinary and necessary operating expenses	<b>-</b> \$ _	0.00				
t monthly income from a business, profession, or f	arm\$	0.00	Copy here ->	\$ 0.00	\$	0.00
et income from rental and other real property	Debto					
oss receipts (before all deductions)	\$_	0.00				
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00				
Net monthly income from rental or other real property	, ф	0.00	Copy here ->	\$ 0.00	\$	0.00

15a. Copy line 14 here⇒ Multiply line 15a by 12 (the number of months in a year).

15. Calculate your current monthly income for the year. Follow these steps:

14. Your current monthly income. Subtract line 13 from line 12.

15b. The result is your current monthly income for the year for this part of the form.

109.93

page 2

3,709.67

3.819.60

3,819.60

44,516.04

x 12

Debtor 1	ORTIZ DIAZ, EDWIN JAVIER	Case number (if known)	

#### o. Oalculate your current monthly moonle for the year. Tollow those steps.

20a. Copy line 19b

**x** 12

Multiply by 12 (the number of months in a year).

20b. The result is your current monthly income for the year for this part of the form

44,516.04

3,709.67

20c. Copy the median family income for your state and size of household from line 16c

33,501.00

#### 21. How do the lines compare?

- Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

#### Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

#### X /s/ EDWIN JAVIER ORTIZ DIAZ

#### **EDWIN JAVIER ORTIZ DIAZ**

Signature of Debtor 1

Date **February 20, 2020** 

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify yo	our case:	
Debtor 1 EDWIN JAVIER OF	RTIZ DIAZ	
Debtor 2 (Spouse, if filing)		
United States Bankruptcy Court for the	District of Puerto Rico, San Juan Division	
Case number(if known)		☐ Check if this

Official Form 122C-2

## **Chapter 13 Calculation of Your Disposable Income**

04/19

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122G-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4 Living 0 Housing

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

5. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1.786.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor	
--------	--

People who are under 65 years of age	
7a. Out-of-pocket health care allowance per person	\$ <u>55</u> _
7b. Number of people who are under 65	× <b>4</b> _
7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$ Copy here=> \$ 220.00
People who are 65 years of age or older	
7d. Out-of-pocket health care allowance per person	\$ <u>114</u>
7e. Number of people who are 65 or older	×
7f. Subtotal. Multiply line 7d by line 7e.	\$
7g. <b>Total.</b> Add line 7c and line 7f	\$ Copy total here=> \$ 220.00

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

- 8. **Housing and utilities Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.

  583.00
- 9. Housing and utilities Mortgage or rent expenses:
  - 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.

\$ 678.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

bankruptcy. Next divide by 60.						
Name of the creditor	Averaç payme	ge monthly ent				
Banco Popular de Puerto Rico	\$	866.00				
9b. Total average monthly paym	nent \$	866.00	Copy here=>	\$	Repeat the on line 33	nis amount 3a.
. Net mortgage or rent expense.			_		٦	
	Subtract line 9b (total average monthly paymen) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.				Copy here=> \$	0.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

\$ 0.00

Explain why:

9c.

11.	Local transportation expenses: Check the number of vehicle	es for which you claim ar	n ownership or op	erating exper	ise.	
	■ 0. Go to line 14.					
	☐ 1. Go to line 12.					
	2 or more. Go to line 12.					
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards expenses, fill in the <i>Operating Costs</i> that apply for your Census			u claim the o	perating \$	0.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local S may not claim the expense if you do not make any loan or lease two vehicles.					
Vel	Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line 1 contractually due to each secured creditor in the 60 months aft Then divide by 60.					
	Name of each creditor for Vehicle 1	Average monthly payment				
		\$				
	Total Average Monthly Payment	\$	Copy here => -\$ _	0.0	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if the numbert is less than \$0	, enter \$0	. \$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Vel	nicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. D leased vehicles.	o not include costs for				
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
	Total average monthly payment	\$	Copy here => -\$	0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense				Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	. \$	0.00	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles in Public Transportation expense allowance regardless of w			ds, fill in the	\$	217.00
15.	Additional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in what you more than the IRS Local Standard for Public Transportation					0.00

Our	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for				
16.	<b>Taxes:</b> The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from you pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtrathat number from the total monthly amount that is withheld to pay for taxes.  Do not include real estate, sales, or use taxes.		223.44			
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions,					
	union dues, and uniform costs.  Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00			
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filin together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.		0.00			
19.	<b>Court-ordered payments</b> : The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.					
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35	. \$	0.00			
20.	Education: The total monthly amount that you pay for education that is either required:  ■ as a condition for your job, or					
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00			
21.	<b>Childcare:</b> The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$	0.00			
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.		0.00			
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					
		+\$	0.00			
24.	expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  Add all of the expenses allowed under the IRS expense allowances.	<b>+</b> \$ \$	3,029.44			
	expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.					
	expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Ititional Expense Deductions  These are additional deductions allowed by the Means Test.					
Add	expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.	\$				
Add	expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Ititional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or	\$				
Add	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Ititional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or dependents.	\$				
Add	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Iditional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or dependents.  Health insurance  \$ 0.00	\$				
Add	expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Sitional Expense Deductions These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or dependents.  Health insurance \$ 0.00  Disability insurance \$ 0.00	\$your				
Add	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Ititional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or dependents.  Health insurance  \$ 0.00  Disability insurance  \$ 0.00  Health savings account  \$ 0.00	\$your	3,029.44			
Add	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Ititional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or dependents.  Health insurance  Disability insurance  \$ 0.00  Total  \$ 0.00  Copy total here=>	\$your	3,029.44			
Add	Add all of the expenses allowed under the IRS expense allowances.  Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Iditional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or dependents.  Health insurance  Disability insurance  \$ 0.00  Health savings account  \$ 0.00  Copy total here=>  Do you actually spend this total amount?  No. How much do you actually spend?  Yes  \$	\$\$	3,029.44			
25.	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  ditional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or dependents.  Health insurance  Disability insurance  \$ 0.00  Disability insurance  \$ 0.00  Total  \$ 0.00  Copy total here=>  Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of you household or member of your immediate family who is unable to pay for such expenses. These expenses may include	\$\$ our \$	0.00			

Debtor 1	ORTIZ DIAZ, EDWIN JAVIER	Case number	r (if known)				
28.	Additional home energy costs. Your home	e energy costs are included in your insurance and oper	rating expenses on line 8.				
	If you believe that you have home energy costhen fill in the excess amount of home energ	sts that are more than the home energy costs included by costs.	in expenses on line 8,				
	You must give your case trustee documental claimed is reasonable and necessary.	he additional amount	\$	0.00			
		ren who are younger than 18. The monthly expense endent children who are younger than 18 years old to a					
	You must give your case trustee documental reasonable and necessary and not already a	the amount claimed is					
	* Subject to adjustment on 4/01/22, and ever	ry 3 years after that for cases begun on or after the date	e of adjustment.	\$	0.00		
		ne monthly amount by which your actual food and clothi ances in the IRS National Standards. That amount can B National Standards.					
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.						
	You must show that the additional amount cl	aimed is reasonable and necessary.		\$	0.00		
	Continuing charitable contributions. The instruments to a religious or charitable organ	amount that you will continue to contribute in the form ization. 11 U.S.C. § 548(d)(3) and (4).	of cash or financial				
	Do not include any amount more than 15%	of your gross monthly income.		<u> </u>	0.00		
	Add all of the additional expense deduction Add lines 25 through 31.	ions.		\$	0.00		
Dedu	ictions for Debt Payment						
	o calculate the total average monthly paymen ne 60 months after you file for bankruptcy. The Mortgages on your home	nt, add all amounts that are contractually due to each se nen divide by 60.			e monthly		
33a.	Copy line 9b here		=>	payme \$	866.00		
	Loans on your first two vehicles			·—	000.00		
33b.	·		=>	\$	230.50		
33c.				\$	0.00		
33d.	List other secured debts			-			
Name	e of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?				
			□ No				
	-NONE-		☐ Yes	\$			
			_	-			
			□ No				
			□ Yes	\$			
			□ No				
			П V	\$			
33e.	Total average monthly payment. Add lines	\$ 33a through 33d \$	1,096.50 Copy total here=:	.   \$_	1,096.50		

- 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?
  - ☐ No. Go to line 35.
  - Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Identify property that secures the debt			Monthly cure amount	
Banco Popular de Puerto Rico	Residence	\$	5,500.80	÷ 60 = \$	91.68	
Oriental Bank	2018 Hyundai Tucson SE	\$	1,524.00	÷ 60 = \$	25.40	
		\$		÷ 60 = +	\$	
				Copy	<i></i>	

Total \$ \_\_\_\_\_117.08 | Copy total here=> \$ \_\_\_\_\_117.08

- 35. Do you owe any priority claims such as a priority tax, child support, or alimony that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.
  - ☐ No. Go to line 36.
  - Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims \$ 9,861.60 ÷ 60 \$

36. Projected monthly Chapter 13 plan payment

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense

\$ \_\_\_\_\_ Copy total here=> \$ \_\_\_\_

37. Add all of the deductions for debt payment.

Add lines 33e through 36.

\$ 1,377.94

164.36

#### **Total Deductions from Income**

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS expense allowances

Copy line 32, All of the additional expense deductions

Copy line 37, All of the deductions for debt payment

Total deductions.....

\$ 3,029.44

0.00

1,377.94

4,407.38 Copy total here=>

\$ 4,407.38

Part 2	: De	termine Your	Disposable Income Under 11	U.S.C. § 1325(	(b)(2)	)				
			ent monthly income from line 1 urrent Monthly Income and Ca						\$	3,709.67
	children disability in accord	. The monthly payments for	y necessary income you received average of any child support pay a dependent child, reported in the blicable nonbankruptcy law to the ld.	ments, foster o Part I of Form	are p 1220	payments, or C-1, that you rece	eive	d \$	0.00	
	employe U.S.C. §	r withheld from	tirement deductions. The month n wages as contributions for quali s all required repayments of loans ).	fied retirement	plan	s, as specified in		\$	0.00	
42.	Total of	all deduction	ns allowed under 11 U.S.C. § 70	<b>7(b)(2)(A).</b> Co	py lii	ne 38 here=	=>	\$ 4,40	7.38	
	and you expense	have no reaso s. You must g	Il circumstances. If special circunable alternative, describe the spive your case trustee a detailed exthe expenses.	ecial circumsta	ances	and their				
Des	cribe th	e special circ	cumstances			Amount of exp	ens	e		
					\$					
					- \$					
					_ \$			_		
				Γ			$\neg$	<del></del> -		
				Total	\$	0.00		Copy here=>\$ 	0.00	
44.	Total ad	justments. A	dd lines 40 through 43			=>	\$_	4,407.38	Copy here=> -\$	4,407.38
45.	Calculat	e your mont	hly disposable income under §	<b>1325(b)(2).</b> S	ubtra	act line 44 from li	ine 3	39.	\$	-697.71
Part 3	: Ch	ange in Inco	me or Expenses							
	in this fo bankrupt example column,	rm have chang by petition and if the wages enter line 2 in	r expenses. If the income in Forr ged or are virtually certain to chan d during the time your case will be reported increased after you filed the second column, explain why the fill in the amount of the increase	ge after the da open, fill in the your petition, controlling the day be wages incre	te yo e info heck	ou filed your or	or rst	1		
Forr	n	Line	Reason for change			Date of change	je	Increase or decrease?	Amount o	f change
□ 1 □ 1 □ 1	22C-1 22C-2 122C-1 122C-2 122C-1 122C-2							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease	\$ \$ \$	
	122C-1 122C-2							☐ Increase☐ Decrease	\$	

Part 4:	Sign Below
	By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.
X	Z /s/ EDWIN JAVIER ORTIZ DIAZ EDWIN JAVIER ORTIZ DIAZ Signature of Debtor 1
Date	February 20, 2020  MM / DD / YYYY

Case number (if known)

**ORTIZ DIAZ, EDWIN JAVIER** 

Debtor 1

Certificate Number: 15725-PR-CC-034100888



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>February 17, 2020</u>, at <u>11:14</u> o'clock <u>AM EST</u>, <u>Edwin Ortiz</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>District of Puerto Rico</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 17, 2020

By: /s/Benjamin Caba

Name: Benjamin Caba

Title: Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## United States Bankruptcy Court District of Puerto Rico, San Juan Division

In re	ORTIZ DIAZ, EDWIN JAVIER		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	NSATION OF ATTO	ORNEY FOR D	DEBTOR	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	232.00	
	Balance Due		\$	3,768.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. <b>I</b>	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.				
[	I have agreed to share the above-disclosed compensations of the agreement, together with a list of the name				
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
b c.	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed]	ment of affairs and plan which	ch may be required;		
б. В	y agreement with the debtor(s), the above-disclosed fee	does not include the following	ng service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any nkruptcy proceeding.	agreement or arrangement for	or payment to me for	representation of the debtor(s) in	
Fe	bruary 20, 2020		eroa-Carrasquillo		
Da	tte	Roberto Figuero Signature of Attorna			
			ey squillo Law Office	PSC	
		PO Box 186			
		Caguas, PR 0072			
		(787) 744-7699   I rfc@rfigueroalav	Fax: (787) 746-529	4	
		Name of law firm			
		J J			